



Mature Adults (55+) Program Trip

# Historic Bath & Washington, NC



Saturday, June 12, 2010

**DESCRIPTION:** The Washington Summer Festival is one of the premier events along the North Carolina Coast. Enjoy great food, arts & crafts, and entertainment as you soak up the sun. We will also do some touring in historic Bath.

**PICK-UP:** Bus departs at 8:00 a.m. from the Northgate Mall parking lot in front of Sears Auto Center (1620 Guess Rd). Estimated return time is 7:00 p.m. We will be traveling in DPR buses.

**PRICING:**

| Resident – Play More Card | Resident without Card | Non-resident with Card | Non-resident, without Card |
|---------------------------|-----------------------|------------------------|----------------------------|
| \$11                      | \$12                  | \$16                   | \$17                       |

**Payment:** due by Friday, 5/28/2010

**Minimum** number of participants by 5/28/10: 25

**GENERAL INFORMATION:** Price includes transportation; bring money for souvenirs and food.

**WALKING AMOUNT:** HIGH – you will be walking all over the grounds at a comfortable pace.

**HOW TO REGISTER:** Complete form below and return with full payment by mail to: Durham Parks & Recreation, Mature Adults Unit, 101 City Hall Plaza, Durham, NC 27701, or drop it off at any DPR Center.

**MAKE CHECKS PAYABLE TO:** CITY OF DURHAM

**FOR ADDITIONAL INFORMATION, CALL (919) 354-2710.**

Bath & Wash. NC  
6/12/10

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

EMERGENCY CONTACT NAME: \_\_\_\_\_ EMERGENCY CONTACT PHONE: \_\_\_\_\_

**I will need a wheelchair accessible vehicle** (circle one):    Yes        No

If yes, please speak with our staff prior to registering for this trip

**Are there any health or medical issues we need to know?** \_\_\_\_ If yes, please explain on an attached sheet and speak with our staff prior to registering for this trip.

**ASSISTANCE POLICY:**

DPR cannot provide personal assistance (i.e. assistance with walking, pushing wheelchairs, toileting, medications, etc.). If you have these needs or others, you will need to bring someone to assist you.

**CONDUCT CLAUSE:** I attest that I am 55 years old or greater and that I will follow all program rules and comply with all reasonable requests made by staff while on this trip. I understand that, due to City guidelines, I may not transport any alcoholic beverages on City vehicles.

**REFUND POLICY:**

Cancellations must be made by **5/28/10** in order to receive a refund. Full or partial refunds will be made only if a replacement can be found, and are subject to non-refundable expenses incurred by DPR. If DPR cancels a trip, a full refund will be given. Occasionally, circumstances beyond our control may occur during a trip, resulting in a change to trip itineraries. **“NO SHOWS” FOR TRIPS RECEIVE NO REFUND.**

**I have read the refund policy (initial)** \_\_\_\_\_

**PROGRAM PARTICIPATION ACCIDENT INSURANCE COVERAGE AND ACKNOWLEDGMENT:**

My signature hereby constitutes my knowledge that a risk of accidental injury may result from participation in this RECREATION ACTIVITY. This RECREATION ACTIVITY includes insurance coverage in the amount of \$5,000 for medical expenses and \$250 for dental expenses. This insurance will pay after all other valid and collectable insurance (i.e. it applies on an excess basis).

My signature acknowledges the acceptance of the assistance, conduct, refund, and liability conditions.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_